

Home Health ICD-9/ICD-10 Alert

ICD-10 Update: 5 Tips Pave Your Way to Sequela Coding in ICD-10

Remember this sequencing rule and its exceptions.

You may know your way around late effects coding quirks in ICD-9, but do you know what your coding will look like in ICD-10? Good news: You'll find that much of what you already know about coding these conditions transfers easily to the new system.

New: One major difference in ICD-10 is the use of the "S" character to denote a sequela or late effect. The "S" character replaces the ICD-9 late effects categories (905 -- 909).

Example: Current late effect code 905.1 (Late effect of fracture of spine and trunk without spinal cord lesion) will become M48.43xS (Fatigue fracture of vertebra, cervicothoracic region, sequela of fracture).

Follow these tips before you report a sequela code, so that your agency is never "late" collecting ethical reimbursement.

Tip 1: Review the Definition

Once you transition to ICD-10, you'll start to see the term "sequela" used instead of the ICD-9 term "late effects." Remember, a sequela is the residual effect that occurs after the acute phase of an illness or injury has terminated. For instance, you'll report a sequela ICD-10 code for the scar formation after a burn.

Tip 2: Time for Sequela Varies

As in ICD-9, you won't find any time limit specifying when you can start using a sequela code. Why not? Because injuries and illnesses vary in their healing times. The residual effect may be apparent early, such as in the case of a cerebral infarction, or it may occur months or years later, such as an effect due to a previous injury.

While there's no time limit for when it's appropriate to report a sequela code, the acute condition does need to be resolved, says consultant **Pam Warmack** with **Clinic Connections** in Ruston, La.

Tip 3: Generally, You Need 2 Codes -- In This Order

When you code sequela, you'll generally need two codes, says **Sharon Molinari, RN, HCS-D, COS-C**, a home health consultant based in Henderson, Nev. For most sequela, you'll sequence the condition or nature of the sequela first. You'll follow this code with the sequela code.

In other words, "code what you see first, and the late effect later," says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, HCS-O**, consultant and principal of **Selman-Holman & Associates** in Denton, TX. The sequencing rule for sequela is the same, she says.

For example: If your patient has traumatic arthritis in her left ankle due to an old ankle fracture, you'll list 716.17 (Traumatic arthropathy; ankle and foot) followed by 905.4 (Late effect of fracture of lower extremities) in ICD-9. In ICD-10, you might report M12.572 (Traumatic arthropathy, left ankle and foot) and S82.892S (Other fracture of left lower leg; sequela). You will also need to add an ICD-10 external cause code describing how the patient got the injury with an "S" seventh character for sequela.

Exceptions: You may encounter instances when you will report the sequela followed by a manifestation code. When the residual you're coding for is designated as a manifestation code, you'll need to follow manifestation coding guidelines, whether you're coding in ICD-9 or ICD-10. Remember that you must sequence the manifestation code immediately after

its etiology, and the manifestation code should never be the primary diagnosis, Molinari says.

In ICD-10, you'll also find instances when the sequela code is expanded (at the fourth, fifth, or sixth character) to reflect the manifestation. For instance, check out I69.191 (Dysphagia following nontraumatic intracerebral hemorrhage). The word "following" means the definition includes the sequela. This code also instructs you to use an additional code for the type of dysphagia.

Tip: When your patient's sequela is the result of an injury, you'll need to add the external cause code for how an injury happened with a seventh character "S" in ICD-10. But you should avoid the activity codes or external cause status codes because these codes are not required in home care, Selman-Holman says.

Tip 4: Here's How to Use Character "S"

If you're looking at injury sequela(e) from ICD-10-CM's Chapter 19, you'll find most codes have a 7th character, which includes the character "S." When using seventh character "S," you need to use both the injury code that precipitated the sequela and the code for the sequela itself.

The "S" character identifies the injury responsible for the sequela. You'll sequence the specific type of sequela (e.g., scar) first, followed by the injury code.

Example: You would report M17.31 (Unilateral post-traumatic osteoarthritis, right knee) followed by S87.01xS (Crushing injury of right knee, sequela). Then you would add the external cause code describing how the injury happened with an "S" as the seventh character.

Tip 5: Examine Pregnancy and Burns Scenarios

You'll have special coding rules in certain situations under ICD-10.

Burns: You can report both a current burn/corrosion code and a sequela(e) code at the same time. This is because a non-healing burn or corrosion is still coded as an acute burn. A patient's healing burn or corrosion may coincide with the sequela(e) of a healed burn or corrosion.

Pregnancy: Code O94 describes the sequela(e) of pregnancy, childbirth, and the puerperium. You'd sequence this second, with the complication first. For instance, you would report O90.81 (Anemia of the puerperium) followed by O94 (Sequela[e] of complication of pregnancy, childbirth, and puerperium).